

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hms		5-21-99
O.I.P.E. CLASSIFIER		25	09-02-99
FORMALITY REVIEW	AS/AS		12-1-99/3-16-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	04/01/99
2	✓	✓	04/01/99
3	✓	✓	04/01/99
4	✓	✓	04/01/99
5	✓	✓	04/01/99
6	✓	✓	04/01/99
7	✓	✓	04/01/99
8	✓	✓	04/01/99
9	✓	✓	04/01/99
10	✓	✓	04/01/99
11	✓	✓	04/01/99
12	✓	✓	04/01/99
13	✓	✓	04/01/99
14	✓	✓	04/01/99
15	✓	✓	04/01/99
16	✓	✓	04/01/99
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27	✓	✓	04/01/99
28	✓	✓	04/01/99
29	✓	✓	04/01/99
30	✓	✓	04/01/99
31	✓	✓	04/01/99
32	✓	✓	04/01/99
33	✓	✓	04/01/99
34	✓	✓	04/01/99
35	✓	✓	04/01/99
36	✓	✓	04/01/99
37	✓	✓	04/01/99
38	✓	✓	04/01/99
39	✓	✓	04/01/99
40	✓	✓	04/01/99
41	✓	✓	04/01/99
42	✓	✓	04/01/99
43	✓	✓	04/01/99
44	✓	✓	04/01/99
45	✓	✓	04/01/99
46	✓	✓	04/01/99
47	✓	✓	04/01/99
48	✓	✓	04/01/99
49	✓	✓	04/01/99
50	✓	✓	04/01/99

Claim	Final	Original	Date
51	✓	✓	04/01/99
52	✓	✓	04/01/99
53	✓	✓	04/01/99
54	✓	✓	04/01/99
55	✓	✓	04/01/99
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57	✓	✓	04/01/99
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62	✓	✓	04/01/99
63	✓	✓	04/01/99
64	✓	✓	04/01/99
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77	✓	✓	04/01/99
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87	✓	✓	04/01/99
88	✓	✓	04/01/99
89	✓	✓	04/01/99
90	✓	✓	04/01/99
91	✓	✓	04/01/99
92	✓	✓	04/01/99
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96	✓	✓	04/01/99
97	✓	✓	04/01/99
98	✓	✓	04/01/99
99	✓	✓	04/01/99
100	✓	✓	04/01/99

Claim	Final	Original	Date
101			
102			
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If more than 150 claims or 10 actions
 staple additional sheet here

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